

AUGUST 2014 GILA COUNTY OFFICE OF HEALTH IMMUNIZATION SCHEDULE



SUN MON TUES WED THU FRI SAT

TH	HEDULE IS SUBJECT TO E OFFICE AT (928)402-8 ING YOUR SHOT RECOR	811 TO VERIFY. P	LEASE REMEMBER	<mark>R TO</mark>	1 SHOTS 8-11 1-7	2
3	SHOTS 8-11 1-7 TB Testing	5 SHOTS 8-11 1-7 TB Testing	6 SHOTS 8-11 1-7 TB Testing	7 SHOTS 8-11 1-7	8 SHOTS 8-11	9
10	SHOTS 8-11 1-4 TB Testing	12 SHOTS 8-11 1-4 TB Testing	13 SHOTS 8-11 1-4	14 WELL BABY NO SHOTS	FAMILY PLANNING NO SHOTS	16
17	SHOTS 8-11 1-4 (BYAPPT) TB Testing	SHOTS 8-11 2-4 (BY APPT) TB Testing	ORTHO CLINIC NO SHOTS	21 SHOTS 8-11 2-4 (BY APPT)	NO SHOTS	23
24	SHOTS 8-11 2-4 (BY APPT) TB Testing	26 SHOTS 1-4 (BY APPT) TB Testing	27 SHOTS 8-11 1-4 (BY APPT)	28 SHOTS 8-11 1-4 (BY APPT)	NO SHOTS	30